## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10-617-977

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER	OTHER THAN	
(Column 1) (Column 2)						nn 2)		ГҮРЕ 🗆		OR SMALL ENTITY			
TOTAL CLAIMS			20					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBE	ER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			20 minus 20= *			2		X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS 3				nus 3 =	* (	)		X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT							+140=		OR	+280=			
* If the difference in column 1 is less than zero, enter "0" in column 2						7	TOTAL	3:75	OR	TOTAL			
CLAIMS AS AMENDED - PART II											OTHER		
		(Column 1)		(Colur		(Column 3)		SMALL		OR	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF M	Minus	***	CLAIM	=		X42=		OR	X84=		
<u> </u>	FINOT PRESE	NTATION OF M	OLTIPLE DEP	ENDENT	CLAIN			+140=		OR	+280=		
							_	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colur	mn 2)	(Column 3)							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=		OR	X84=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDENI	CLAIM			+140=		OR	+280=		
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colur		(Column 3)					/ DDII. 1 CC		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	П	X\$ 9=		OR	X\$18=		
	Independent	* INTATION OF M	Minus	***	CL AIRA	=		X42=	-1	OR	X84=		
<u> </u>	I IIIO I FRESE	INTATION OF M	OLITICE DEF	CINDENI	CLAIM		¹	+140=		OR	+280=	-	
.* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										OB.	TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													